#### **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificati Number :	<b>on</b> 9400	0089			Repo Filed		CA	NDI	DATE		COM	AITTEE	<b>V</b>	LUBB	1131	
Name of Filing C	ommittee, Candid	late or L	obbyist:	,	YOUN	GBLOO	D, RC	SIT	A COM	ТО	ELECT					
Street Address:	4613 MORRIS	S ST														
City:	PHILADELPHI	Α					State	e:	PA			Zip Co	de: 19	9144-42	226	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D. PRIM		P	POST-	3.		AMENDN REPORT		Yes	No	<b>~</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. <b>X</b>	2ND FRIDA ELECTION	Y PRE	5.	30 D.	AY TION	P	POST-	6.		TERMINA REPORT		Yes	No	<b>✓</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2020				NG ME					PAPER		$\checkmark$	DISKE	ΓΤΕ
Name of Office S	- Sought by Candida	te:			-		DAT	ΈΟ	F ELE	СТІО	N	District Number	Office Code	Part	y Code	County Code
DEDDECENTATI	VE IN THE GENEI	DAI ACC	SEMBLY				МО		DAY	YE	AR	198	STH	DEM		51
REFRESENTATI	VE IN THE GENE	VAL ASS	DEMBE					11		3	2020		(SEE IN	STRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY	YEAR			МО		DAY	YI	AR	FC	OR OFFI	CE USE	ONLY	
Expenditures	from:		5 19	20	020	то		6	2	22	2020					
A. Amount Bro	ught Forward Fro	m Last R	leport			\$				1,9	93.00					
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule I	) \$	5				0.00					
C. Total Funds	Available (Sum O	f Lines A	and B)			\$	5			1,9	993.00					
D. Total Expend	ditures (From Sch	edule II	Ι)			\$	5			4	00.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$	;			1,5	93.00					
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedul	le II)	\$	5				0.00					
G. Unpaid Debt	s And Obligations	(From	Schedule IV	/)		\$	5				0.00					
				AFF	IDAV	IT SE	CTIC	NC								
	a Committee rep	•	_						• '		_		of my kno	wledge ;	and belie	ef . true
correct and comple	ete.		e attached se	cau.cs	, mea e	рарсі	o. b, c				, are to	c best e	a my kno	euge c	a beile	,
Sworn to and subs	cribed before me thi day of	S	20							S	ignature	of Perso	n Submit	ting Rep	ort	
	Signatu	ire				_						Prin	ted Name			
My Commission Ex	rpires							·				Ema	il			
	МО	D	AY	YR					Are	a Coc	le	Daytin	ne Teleph	one Nur	nber	
Part II- If this is	a report of a can	didate's	authorized	Comm	ittee,	Candid	late si	hall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of red.	my knowl	edge and beli	ief this	politica	al comn	nittee h	as n	ot violat	ed an	y provis	ions of th	e act of J	une 3,19	)37 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20								s	ignature	of Candid	ate		
												Printe	ed Name			
My Commission Exp	Signature ires					_						Ema	nil			—
	МО	D	AY	YR		_			Area	Code		D	aytime T	elephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
YOUNGBLOOD, ROSITA COM TO ELECT	From:	<u>5/19/202</u>	<u>0</u> To:	6/22/2020
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)	\$	0.00		
TOTAL for the Reporting	g Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					
	•	·			•	•	$\overline{}$	DACE TOTAL

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

**PAGE TOTAL**\$ 0.00

### ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee or Candida	ite		Rep	oorting P	eriod			
			From: To:					
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

**PAGE TOTAL \$**0.00

#### **PART C**

### **Contributions Received From Political Committees**

**OVER \$250.00** 

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candi	me of Filing Committee or Candidate		Reporting Period					
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

### ALL OTHER CONTRIBUTIONS

**OVER \$250.00** 

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate				Rep	orting Pe	TO:  TE AMOUNT  DAY YEAR \$ 0.00				
				Fror	n:		To	o:		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State	Zi	p Code (Plus	<b>4</b> )						
Employer Name		•			Occupa	tion	•	•		
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	ode (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	<b>TAL</b> 0.00

## OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or	Candidate		Report	ting Perio	bd			
			From:			To:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description		•		•				
Enter Grand Total of Part E	on Schedule T. Detailer	d Summary Page	Section	4			PAGE TOTAL	
Enter Grana Total of Fait E	on senedare 1, Betanet	a Summary rage,	Section				\$ 0.0	0

#### **SCHEDULE II**

#### **IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	od						
YOUNGBLOOD, ROSITA COM TO ELECT	From:	<u>5/19/2020</u> <b>To:</b>	6/22/2020					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)								
TOTAL for the Reporting Pe	eriod (2)	\$	0.00					
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)								
TOTAL for the Reporting Pe	eriod (3)	\$	0.00					
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 3	•	\$	0.00					

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candid	ate		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	1				Re	porting l	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									- \$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
YOUNGBLOOD, ROSITA COM TO ELECT	From	<u>5/19/2020</u>	То:	<u>6/22/2020</u>	

				DATE			AMOUNT
<b>To Whom Paid</b> Major Wing Lee Deli				DAY	YEAR		
Mailing Address 4207 Ridge Avenue			6	2	2020	\$	400.00
<b>City</b> Philadelphia	State PA	<b>Zip Code (Plus 4)</b> 19129	1	otion of Exp			
Futou Cuand Tatal of Funanditures							
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	400.00